Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

DA5309

CLAIMS AS FILED - PART I (Column 1)						ımn 2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			19				F	RATE	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS) 7 minus 20=		* 0			K\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			4 minus 3 =		* /			X42=	da.	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT					•		 	140=	,	OR	+280=	
* If the difference in column 1 is less than zero, enter					"0" in c	column 2		OTAL	417	OR	TOTAL	
	С	LAIMS AS A	MENDE) - PART II					111	10	OTHER	THAN
_		(Column 1)		(Colur		(Column 3) SMALL			ENTITY	OR	SMALLI	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF MI	Minus	***	CL AIAA	= _	>	< 42=		OR	X84=	
	FINOT PRESE	INTATION OF MI	JETIPLE DE	PENDENT	CLAIM		+	140=		OR	+280=	
TOTAL										OR	TOTAL	
		(Column 1)	(Column 3)	ADL	DIT. FEE			ADDIT. FEE	L			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colur HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=	
	Independent	* INTATION OF MU	Minus	***	CL AIM	= -	>	(42=		OR	X84=	
	THOI FILSE	INTATION OF INIC	DETIFIE DEI	PENDENI	CLAIM		+	140=		OR	+280=	
TOTAL ADDIT. FEE											TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	***	=	X	(42=		OD	X84=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT						-	140=		OR		
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=	
**	f the "Highest Nu If the "Highest Nu	mber Previously Pa mber Previously Pa nber Previously Pai	aid For" IN THI aid For" IN TH	S SPACE IS	s less tha s less tha	n 20, enter "20." In 3. enter "3."		TOTAL IT. FEE n the app	ropriate bo		TOTAL ADDIT. FEE	

*U.S. Government Printing Office: 2003 — 498-278/69151